

California Traumatic Brain Injury Planning Project Statewide Action Plan

Goal 1: Californians will be more aware of and knowledgeable about traumatic brain injury [TBI], its effects and issues regarding prevention			
Year to Begin: Year 1			
Partners: Department of Mental Health, Brain Injury Association of America, Department of Health Services [e.g., Anti-Smoking and Teen Pregnancy Campaigns], TBI Advisory Board, TBI survivors, TBI family members, TBI service providers, multi-media campaign consultants, Universities and Colleges, Department of Education, and other health-related agencies and organizations.			
Objective	Action	Criteria	Performance Measures
1.1. Develop and implement a written plan for a statewide TBI Public Awareness Campaign.	1.1.a. Develop specific criteria for the plan content including timetables for review, completion and implementation, and performance measures to evaluate the planning process and product.	The plan will identify issues, define terms, identify allies and roadblocks, identify spokespeople and identify strategies to raise public awareness.	The plan will be developed within the specified timeframe and meet the specific criteria and performance measures. The content and feasibility of implementation of the plan will be judged to be satisfactory or higher by the Department of Mental Health and Advisory Board.
	1.1.b. Convene a plan development group that represents the TBI population and includes expertise in TBI, public awareness campaigns, including the use of written and multi media materials, and cultural/language needs of various populations.		
	1.1.c. Develop a budget and identify funding sources for implementation of the plan.		
	1.1.d. Develop performance criteria for ongoing review of the currency, relevance and utility of the materials.		

It should be noted that the listing of Partners is not all inclusive.

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Objective	Action	Criteria	Performance Measures
1.2. Collect and develop written materials on the causes and consequences of TBI, common treatments and prevention.	1.2.a. Compile TBI-related information from existing surveillance, data, documents and articles. Identify or develop concise written material for an audience that includes low literacy populations.	Materials will be easily understood, generally available and accessible.	<p>Prior to distribution, selected members of the general public, including specific culture/language populations will be asked to review the materials for clarity and usefulness. The review will include a pre and posttest of knowledge.</p> <p>There will be an ongoing review of materials for currency and relevance.</p>
	1.2.b. Translate materials for specific cultures/language populations as needed.		
	1.2.c. Develop performance criteria for initial and ongoing review of the currency, relevance and utility of the materials.		
1.3. Collect and develop multi-media materials on the causes and consequences of TBI, common treatments and prevention.	1.3.a. Collaborate with the Brain Injury Association of America and others to identify and collect multi media materials on causes and consequences of TBI.	Materials will be easily understood and appropriate for a wide-ranging audience.	<p>Prior to distribution, selected members of the general public, including specific culture/language populations will be asked to review the materials for clarity and usefulness. The review will include a pre and posttest of knowledge.</p> <p>There will be an ongoing review of materials for currency and relevance.</p>
	1.3.b. Develop additional multi media materials, as needed for specific cultures/language populations.		
	1.3.c. Develop performance criteria for initial and ongoing review of the currency, relevance and utility of the materials.		

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Objective	Action	Criteria	Performance Measures
1.4. Develop and implement public awareness training program throughout the State.	1.4.a. Convene a training committee comprised of representatives of the TBI community and people with expertise in TBI and training to participate in the development of a training program that targets the general population and specified cultural/language populations.	The goal of the training is to raise awareness and to increase understanding about the disability without blaming the victim.	A review of the plan, review of pre and post tests for training, notes on feedback from participants at events, and a review of materials used will measure the performance.
	1.4.b. Define purpose, goals, content and evaluation component of public awareness training.		
	1.4.c. Conduct focus groups sessions to test content of training program.		
	1.4.d. Develop a form for evaluating the program.		
	1.4.e. Schedule four or more training sessions in the State.		
1.5. Develop and implement public awareness training for specific professional and provider groups throughout the State.	1.5.a. In collaboration with professional and provider groups, redefine or adjust the purpose, goals, content and evaluation component of the public awareness training program for training physicians, professionals, law enforcement, state agencies, providers and other groups throughout the State.	The training will make professional and provider groups more aware and better prepared to deal with TBI.	A review of the plan, review of pre and post tests for training, notes on feedback from participants at events, and a review of materials used will measure the performance.
	1.5.b. Conduct focus groups sessions to test content of training program.		
	1.5.c. Develop a form for evaluating the program.		
	1.5.d. Schedule five or more training sessions in the State.		

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1.6. Develop and implement a media campaign throughout the State.	1.6.a. Collaborate with the Brain Injury Association of America and other groups to identify opportunities and methods to create media attention and interest in TBI.	The media campaign will change the perception of the public about TBI and help to create a supportive and accepting environment for TBI survivors and families.	There will be at least a 15 percent increase in the media attention to TBI in the four areas of the State. Local spokespersons will have made two or more contacts with the media to increase the interest of the media.
	1.6.b. Identify local spokespersons/groups throughout the state to work with local media on increasing awareness of TBI issues.		
	1.6.c. Identify spokespersons from various cultural and language populations to make contact with the media that are directed to those groups.		
	1.6.d. Develop baseline information in four areas of the State on the frequency of media attention to TBI issues.		
1.7. Ensure availability of TBI materials for multiple audiences throughout the State.	1.7.a. In consultation with the Public Awareness Campaign planning group, local TBI support groups, professionals, providers and others agree upon the mode and location for maintaining and distributing written and multi-media information on TBI to the general public, providers, agencies, support groups, hospitals, schools, state and local agencies, physicians, etc.	The public and others will have easy access to information.	Requests for and/or utilization of automated sources of information will be documented and tracked.
	1.7.b. Develop a tracking system to monitor requests for information and/or utilization of automated sources of information.		

Goal 2: Effective and proactive advocacy will promote and support the traumatic brain injury [TBI] system and rights of the individual survivor.			
Year to Begin: Year 3			
Partners: Department of Mental Health, TBI Advisory Board, TBI survivors/family members, TBI service providers, Protection and Advocacy, Inc., Independent Living Centers and organizations, Department of Education, community support groups, State Council on Developmental Disabilities, and Area Boards.			
Objective	Action	Criteria	Performance Measures
2.1. Develop and support a grassroots advocacy program among TBI survivors and organizations.	2.1.a. Research and adapt methods, strategies and materials from effective grassroots advocacy programs within the State and throughout the nation.	The program will focus on the promoting the most critical needs with widespread participation and acceptance on the local level.	The campaign plan will be reviewed and rated as satisfactory or better by local organizations.
	2.1.b. Develop a grassroots advocacy campaign plan and materials in consultation with TBI survivors, families, providers, organizations and others.		The communication network will enjoy consistent growth throughout the first year. Local organizations will report satisfaction with the network and enhanced communication.
	2.1.c. Develop communication linkages between the State, TBI survivors, families, organizations, providers, etc.		Participants will rate the “train the trainer” sessions as satisfactory or higher.
	2.1.d. Develop and provide grassroots advocacy “train the trainer” training to representatives of local organizations and support groups.		Local organizations will provide at least one training session on grassroots advocacy to their members.
	2.1.e. Develop an evaluation form for the training.		
	2.1.f. Explore and publicize opportunities to participate in training on grassroots advocacy offered by other organizations.		

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Objective	Action	Criteria	Performance Measures
2.2. Identify and collaborate with other statewide advocacy organizations.	2.2.a. Identify other statewide advocacy organizations with similar constituencies.	Advocacy efforts will be expanded to groups not directly associated with TBI. The result will be to develop alliances and increase the effectiveness of the efforts.	The statewide advocacy organizations will express willingness to join forces with the TBI community.
	2.2.b. Contact identified statewide advocacy organizations to determine strategies for developing local grassroots involvement and integrating TBI survivors, families and others into their organization's efforts.		The strategies will be effective and result in participation by representatives of the TBI community.
	2.2.c. Develop communication linkages among the organizations.		
	2.2.d. Encourage participation by TBI survivors, families and others in the grassroots advocacy of other organizations with similar constituencies.		The communication linkages will be rated as satisfactory or better by the organizations.

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Objective	Action	Criteria	Performance Measures
2.3. Develop and support relationships with legislators, policy makers, state and community agencies and others.	2.3.a. Obtain a listing of legislators and key staff members by district. Provide the listing to TBI survivors, families, organizations, providers and others. Encourage regular contact with the legislators and staff members about the needs of TBI survivors.	Active participation and interactions with key decision-makers at the state and local levels will strengthen the system and its ability to grow and survive.	<p>A random sample of key decision-makers before and after one-year of active relationship building will show an increase in the awareness and knowledge of TBI issues and needs.</p> <p>Key decision-makers will receive information about TBI on a regular basis and will rate the usefulness of the information as satisfactory or better.</p> <p>The TBI community will take advantage of volunteer and/or participate in the office and activities of key decision-makers.</p>
	2.3.b. Identify and list other key policy makers, and state and local agencies to include key staff people. Provide the listing to TBI survivors, families', organizations, providers and others. Encourage regular contact with the policy makers and agencies about the needs of TBI survivors.		
	2.3.c. Collaborate with local groups to identify local policy making bodies. Compile and publicize a listing of the bodies and key decision-makers.		
	2.3.d. Develop a systematic method to provide ongoing information and education about the needs of TBI survivors to policymakers, state agencies and community organizations.		
	2.3.e. Explore and publicize opportunities to volunteer and/or participate in the office and activities of key decision-makers.		

Goal 2: Effective and proactive advocacy will promote and support the traumatic brain injury [TBI] system and rights of the individual survivor.			
Objective	Action	Criteria	Performance Measures
2.4. Promote participation by TBI survivors and others on existing state and local boards and committees.	2.4.a. Compile and publicize a listing of state and local boards and committees that include participation by members of the public. The listing should include the qualification for membership on the bodies, the appointing authority, terms of office and vacancies.	Knowledge and support for TBI programs will increase as boards and members associated with the TBI community educate committees.	Representatives of the TBI community will make an application for membership on boards and committees.
	2.4.b. Develop and provide board and committee membership “train the trainer” training to representatives of local organizations and support groups.		Participants on the forms and comments will rate the ‘train the trainer’ training as satisfactory or better.
	2.4.c. Develop an evaluation form for the training.		Local organizations will provide at least one training session on board and committee membership within a year after the “train the trainer” training.
	2.4.d. Explore and publicize opportunities for participation in training in leadership and board participation given by other groups.		
	2.4.e. Explore funding for training activities.		

Goal 2: Effective and proactive advocacy will promote and support the traumatic brain injury [TBI] system and rights of the individual survivor.			
Objective	Action	Criteria	Performance Measures
2.5. Promote self-advocacy training and access to advocacy assistance to TBI survivors and families.	2.5.a. Identify and contact statewide advocacy agencies such as Protection and Advocacy Inc., to obtain understanding about their advocacy services, training materials, brochures, guides to laws, and other information on self-advocacy and rights. Disseminate the information.	TBI survivors and families will have skills in self-advocacy and access to advocacy assistance.	Materials will be reviewed by TBI survivors and families and found to be relevant and useful.
	2.5.b. Consult with statewide grassroots advocacy organizations regarding the availability of materials and other information on self-advocacy and rights as well as statewide resources for assistance with individual advocacy. Disseminate the information		TBI survivors and families will report satisfaction with the services of advocacy organizations.
	2.5.c. Develop and/or obtain and provide self-advocacy “train the trainer” training for individuals, families, providers and others.		Participants on the forms and comments will rate the ‘train the trainer’ training as satisfactory or better.
	2.5.d. Develop an evaluation form for the training.		Local organizations will provide at least one training session on self-advocacy within a year of the ‘train the trainer’ training.
	2.5.e. Explore funding for training.		
	2.5.f. Explore and publicize opportunities for self-advocacy training provided by other organizations.		

Goal 3: Individuals with traumatic brain injury [TBI] and their families will have early and ongoing access to comprehensive information about the consequences of their brain injury, prevention of secondary conditions/problems, available resources, and how to obtain services and supports.			
Year to Begin: Year 3			
Partners: Department of Mental Health, Department of Health Services, TBI Advisory Board, local planning groups, multi-cultural organizations, TBI survivors/family members, TBI service providers, Brain Injury Association of America, TBI Technical Assistance Center, and hospitals.			
Objective	Action	Criteria	Performance Measures
3.1. Increase the knowledge of survivors, families and community agencies about conditions associated with the various levels of severity of traumatic brain injuries.	3.1.a. Review existing information from other states, and state and national organizations about conditions associated with various levels of severity of traumatic brain injuries.	Information will be user friendly, complete, available in other languages, well publicized and easily accessed.	Feedback from TBI professionals, community agencies, survivors and families including various cultures and language groups available on an ongoing basis will rate the usability and availability of the information as satisfactory or higher.
	3.1.b. Adapt the information as necessary for California.		
	3.1.c. Obtain feedback from TBI professionals, community agencies, survivors and families, including various cultures and language groups. Revise information as required.		
	3.1.d. In consultation with local planning groups, determine the most effective way to distribute the information.		
	3.1.e. Develop a central source that either contains or explains how to obtain the information.		

Goal 3: **Individuals with traumatic brain injury [TBI] and their families will have early and ongoing access to comprehensive information about the consequences of their brain injury, prevention of secondary conditions/problems, available resources, and how to obtain services and supports.**

Objective	Action	Criteria	Performance Measures
3.2. Increase the knowledge of TBI survivors, families and community agencies about the long-term effects and conditions secondary to TBI and methods of prevention.	3.2.a. Review existing TBI secondary conditions/disabilities literature, monographs, and assessment findings.	Information will be user friendly, complete, available in other languages, well publicized and easily accessed.	Feedback from TBI professionals, community agencies, survivors and families including various cultures and language groups available on an ongoing basis will rate the usability and availability of the information as satisfactory or higher.
	3.2.b. Review TBI secondary conditions/ disabilities conditions across conditions.		
	3.2.c. Review information developed by other states and national organizations on TBI secondary conditions/disabilities.		
	3.2.d. Compile or adopt/adapt comprehensive information on secondary conditions/ disabilities across conditions and methods of prevention.		
	3.2.e. Obtain feedback from TBI professionals, community agencies, survivors and families, including various cultures and language groups. Revise information as required.		
	3.2.f. In consultation with local planning groups, determine the most effective way to distribute the information.		
	3.2.g. Develop a central source that either contains or explains how to obtain the information.		

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Objective	Action	Criteria	Performance Measures
3.3. Develop information and materials specific to TBI secondary conditions and disabilities.	3.3.a. Using the information developed in Objective 3.2, develop or adapt/adopt user friendly, concise information about secondary conditions and disabilities. The concise information sources should note the availability of the comprehensive information.	Information will be user friendly, complete, available in other languages, well publicized and easily accessed.	Feedback from TBI professionals, community agencies, survivors and families including various cultures and language groups available on an ongoing basis will rate the usability and availability of the information as satisfactory or higher.
	3.3.b. Obtain feedback from TBI professionals, community agencies, survivors and families, including various cultures and language groups. Revise information as required.		
	3.3.c. In consultation with local planning groups, determine the most effective ways to distribute the information.		
	3.3.d. Develop a central source that either contains or explains how to obtain the information.		

Goal 3: Individuals with traumatic brain injury [TBI] and their families will have early and ongoing access to comprehensive information about the consequences of their brain injury, prevention of secondary conditions/problems, available resources, and how to obtain services and supports.			
Objective	Action	Criteria	Performance Measures
3.4. Develop locally based comprehensive resource and information guides on TBI services.	3.4.a. Support the formation of local planning groups throughout the state with representation from TBI survivors and families, local organizations and agencies, support groups, professional organizations, education, public agencies, providers and others.	Information will be user friendly, complete, available in other languages, well publicized and easily accessed.	Feedback from TBI professionals, community agencies, survivors and families including various cultures and language groups available on an ongoing basis will rate the usability and availability of the information as satisfactory or higher.
	3.4.b. Assist the local planning groups to develop comprehensive resource and information guides for available TBI resources including support groups and advocacy.		
	3.4.c. Assist the local planning groups to determine how to develop the information for special cultural and language populations.		
	3.4.d. Assist the local planning groups to determine responsibility for maintaining and updating the information.		
	3.4.e. Develop a central source that either contains or explains how to obtain local information on TBI resources, services and supports.		

Goal 3: Individuals with traumatic brain injury [TBI] and their families will have early and ongoing access to comprehensive information about the consequences of their brain injury, prevention of secondary conditions/problems, available resources, and how to obtain services and supports.			
Objective	Action	Criteria	Performance Measures
3.5. Develop simple brochures/other information on how to access state and local services and supports and distribute widely.	3.5.a. Review service guides developed for other disabilities. Excerpt relevant sections on accessing generic resources such as SSI.	Information will be user friendly, complete, available in other languages, well publicized and easily accessed.	Feedback from TBI professionals, community agencies, survivors and families including various cultures and language groups available on an ongoing basis will rate the usability and availability of the information as satisfactory or higher.
	3.5.b. In consultation with the local planning groups, develop a user-friendly step-by-step guide to accessing state and local services and supports.		
	3.5.c. Obtain input on the readability and usefulness of the guide from TBI survivors and families including representatives from specific culture and language populations.		
	3.5.d. Revise the guide as necessary and translate into languages as required.		
	3.5.e. Develop a central source that either contains or explains how to obtain the guide.		
3.6. Establish mechanisms for guides/pamphlets to be available for patients and families before discharge from the hospital and throughout the community reintegration period.	3.6a In consultation with the Advisory Board and local planning groups, determine the best mechanisms to make guides/pamphlets and other information available in local communities and at the State level.	Information will be available in a number of forms and languages so as to meet the needs of a diverse population of users.	Feedback from TBI professionals, community agencies, survivors and families including various cultures and language groups available on an ongoing basis will rate the usability and availability of the information as satisfactory or higher.
	3.6.b. In consultation with the Advisory Board and local planning groups, determine responsibility for review and update of the information for currency.		
	3.6.c. Develop mechanisms to obtain feedback from survivors and families on the usefulness of the information.		

Goal 4:		The service delivery system for individuals with traumatic brain injury [TBI] will have well defined points of entry for assessment, registry, information, and referrals.	
Year to Begin:		Year 1	
Partners:		Department of Mental Health, Department of Health Services, TBI survivors/family members, TBI service providers, TBI Technical Assistance Center, Brain Injury Association of America, hospitals, emergency medical services, Caregiver Resource Centers, Centers for Independent Living, TBI Project Sites, and law enforcement groups.	
Objective	Action	Criteria	Performance Measures
4.1. Develop a comprehensive written plan to establish multiple points of entry to the TBI service delivery system.	4.1.a. Develop specific criteria for the plan content including timetables for review, completion and implementation; and performance measures to evaluate the planning process and product.	TBI survivors and families will have well-defined, community-based points of access and assistance in obtaining uniform information and individualized referrals to services and supports.	The plan will be developed within the specified timeframe and meet the specific criteria and performance measures.
	4.1.b. Convene a plan development group that represents the TBI population and includes expertise in TBI and service delivery systems for diverse populations to develop the comprehensive plan.		The content and feasibility of implementation of the plan will be judged to be satisfactory or higher by the Department of Mental Health and Advisory Board.
	4.1.c. Develop a budget and identify funding sources for implementation of the plan.		
	4.1.d. Develop an ongoing review process to measure performance and assure relevance and currency of the plan.		The review process will include objective measures of performance and baseline data.

Goal 4: The service delivery system for individuals with traumatic brain injury [TBI] will have well defined points of entry for assessment, registry, information, and referrals.			
Objective	Action	Criteria	Performance Measures
4.2. Obtain understanding and acceptance for the comprehensive plan.	4.2.a. Conduct focus groups throughout the State to gain feedback on the comprehensive plan. Revise the plan as necessary.	The TBI community will support the plan.	Focus groups will be held in four areas of the State.
	4.2.b. Publicize and circulate the revised plan for comment.		All partners will be represented in the focus groups.
	4.2.c. Hold three public forums to present the revised plan and gather comments.		Participants in the public forums will judge the revised plan as satisfactory or better.
	4.2.d. Finalize comprehensive plan.		
4.3. Collect and develop uniform protocols and materials for plan implementation.	4.3.a. Compile and adapt an assessment tool using information from other states, providers, national organizations, and others.	Protocols and information materials will be used by all of the points of entry.	A field test of the assessment tool will find that it accurately screens TBI survivors 85 percent of the time. The rating will be based on feedback from professionals, survivors and families.
	4.3.b. Identify, compile and/or develop uniform information materials on TBI, services, and supports for distribution at the point of entry.	The assessment tool will be appropriate and accurate.	
	4.3.c. Identify, compile and/or develop uniform protocols for referrals to services and supports.	Information will be complete and will include local services and supports.	Feedback from TBI professionals, community agencies, survivors and families including various cultures and language groups available initially and on an ongoing basis will rate the usability and availability of the information and referrals as satisfactory or higher.
	4.3.d. Translate materials for specific cultures/populations as needed.	Preference will be given to using information compiled or developed for other Action Plan Goals.	
	4.3.e. Develop performance criteria for initial and ongoing review of the currency, relevance and utility of the protocols and information materials.		

Goal 4: The service delivery system for individuals with traumatic brain injury [TBI] will have well defined points of entry for assessment, registry, information, and referrals.			
Objective	Action	Criteria	Performance Measures
4.4. Develop a minimal database to identify, register, and track TBI survivors.	4.4.a. Survey other states with defined points of entry to compile a listing of data elements that are routinely collected for TBI survivors. Collect information on maintenance of confidentiality and how the information is shared/used/maintained within their system.	Only data that has a defined use will be collected.	Data elements will meet the routine data needs as measured by the ability points of entry to screen, register and track survivors.
	4.4.b. Survey other California systems that serve people with similar disabilities to compile a listing of data elements that are routinely collected for the people they serve. Collect information on maintenance of confidentiality and how the information is shared/used/maintained within their system.	Data will be maintained and shared so as to protect confidentiality	Data elements will meet the special data needs as measured by the ability of the data system to support requests for funding and responses to information without having to resort to manual counts.
	4.4.c. Determine routine and special data needs and the elements that are required to meet the needs of survivors and to obtain funding and sustainability for programs and activities.	The data system will be linked and easily accessed on various levels.	The collection and maintenance of the data will not be burdensome and will be available to all defined users as measured by feedback from the staff assigned to collect and use the information.
	4.4.d. Agree upon point of entry data elements, method of collection, method to share and report the data, and confidentiality requirements.		
	4.4.e. Develop a timetable for implementation and evaluation standards to measure the efficacy of the data collection effort.		

Goal 4: The service delivery system for individuals with traumatic brain injury [TBI] will have well defined points of entry for assessment, registry, information, and referrals.			
Objective	Action	Criteria	Performance Measures
4.5. Implement the comprehensive plan.	4.5.a. Develop or update the timetable for implementation of the comprehensive plan for points of entry including a selection process for the points of entry.	The timetable should be specific.	A review of the timetable by the Department of Mental Health and the TBI Advisory Board finds the timetable to be realistic.
	4.5.b. Identify funding source for the implementation.	Points of entry should be established without undue delay.	
4.6. Publicize the availability of the points of entry with emphasis on the fact that they are available to all TBI survivors.	4.6.a. Collaborate with the TBI system providers, organizations, survivors and families to publicize the availability of the points of entry including implementation timeframes.	TBI survivors and families should be well informed about the points of entry.	The utilization of points of entry should grow steadily over the first year of establishment.

Goal 5: Individuals with traumatic brain injury [TBI] will have access to long-term service coordination/case management services.			
Year to Begin: Year 2			
Partners: Department of Mental Health, Long-Term Care Planning, Brain Injury Association of America, Department of Developmental Services, Association of Regional Center Agencies, Department of Rehabilitation, Department of Education, TBI Advisory Board, local planning groups, Caregiver Resource Centers, TBI survivors/families, TBI Project Sites, TBI service providers, and hospitals.			
Objective	Action	Criteria	Performance Measures
5.1. Select a model(s) to provide service coordination/case management services to TBI survivors.	5.1.a. Develop criteria for service coordination/case management models. Emphasis should be placed on criteria that promote independence, empowerment, and choice.	Models should produce survivor and family driven services and supports.	The selected models should reflect the case management criteria.
	5.1.b. Compile information on models used in other states to provide person-centered service coordination/case management to TBI survivors, including case management ratios, qualifications of case managers or care coordinators, costs and funding sources, life planning protocols, training for survivors/families, etc.	Models should focus on assisting survivors and families access appropriate services throughout their lifetime.	The selected models should include the ability to test various ways to provide case management to meet the needs of a diverse population.
	5.1.c. Compile information on models used in California to provide person-centered service coordination/case management services to TBI survivors or individuals with similar disabilities, including case management ratios, qualifications of case managers or care coordinators, costs and funding sources, life planning protocols, training for survivors/families, etc.	Models should not be one size fits all but should reflect the diversity of the population served.	The planning group and reviewers report satisfaction with the process and the selected models.
	5.1.e. Convene a planning group that includes TBI survivors and family members, individuals with expertise in TBI, individuals with expertise in provision of person-centered service coordination/case management services and others to review models and make recommendations on adoption of model[s].	Models should emphasize training for survivors/ families on accessing the service delivery system.	

Goal 5: Individuals with traumatic brain injury [TBI] will have access to long-term service coordination/case management services.			
Objective	Action	Criteria	Performance Measures
5.2. Establish pilot programs for delivery of case management services to TBI survivors.	5.2.a. Using the recommendations developed in Objective 5.1, select a person-centered case management model(s) to test as a pilot program(s).	Pilot programs should be selected in a timely manner.	The selection process should meet established timelines.
	5.2.b. Identify the funding source for the pilot program(s).	The framework for pilot programs should be well defined before selection.	Specifications for pilots should be clear as measured by a review of the applications for prospective pilot programs.
	5.2.c. Develop detailed descriptions of the services to be provided as well as qualifications of staff, and reporting requirements for the models.	Pilot programs should be available in various locations.	Applicants, reviewers and others should rate the selection process as satisfactory or higher.
	5.2.d. Develop selection criteria and for the pilot program(s).		
	5.2.e. Implement selection criteria and establish case management pilots in various parts of the State.		
	5.2.f. Develop performance measures to evaluate the effectiveness of the various models. Including measures of cost effectiveness and savings associated with service coordination.		Pilot programs are available in various parts of the State.

Goal 5: Individuals with traumatic brain injury [TBI] will have access to long-term service coordination/case management services.			
Objective	Action	Criteria	Performance Measures
5.3. At the end of the first year of the pilot programs develop a plan to provide statewide access to case management services.	5.3.a. In collaboration with TBI survivors, families, providers and others, use the Objective 5.2 performance measures to evaluate the model(s) in the pilot.	The pilot programs are successful and produce valuable information.	The pilot programs meet or exceed the performance measures including cost effectiveness.
	5.3.b. Convene or reconvene the case management planning group to develop and implement a plan to provide person-centered case management services throughout the state using the models and practices that were found to be most effective.	Effective practices are identified and replicated.	A review of the plan to establish person-centered case management services statewide is judged satisfactory and realistic by the Department of Mental Health.
	5.3.c. Develop a budget and funding recommendations for case management services throughout the State including measures of cost effectiveness.	Sufficient information is gathered to measure cost effectiveness.	Cost effectiveness measures are established.
	5.3.d. Review and revise performance measures and criteria to evaluate the effectiveness of ongoing case management services.		

Goal 6: Community-based long-term individualized services and supports will be available, affordable and accessible to individuals with traumatic brain injuries [TBI].			
Year to Begin: Year 3			
Partners: Department of Mental Health, TBI Advisory Board, local planning groups, TBI survivors/families, TBI service providers, Department of Health Services, Department of Education, Department of Social Services, Department of Rehabilitation, and TBI organizations and support groups.			
Objective	Action	Criteria	Performance Measures
6.1. Increase the capacity of communities throughout the State to provide the full continuum of services and supports for individuals with brain injuries and their families.	6.1.a. Support the formation of local planning groups throughout the state with representation from TBI survivors and families, local organizations and agencies, support groups, professional organizations, education, public agencies, providers and others.	Collaboration and networking in local communities improves the availability and quality of services and supports to TBI survivors and families.	The written 2-year local action plan will be reviewed and found to be feasible by the Department of Mental Health and TBI Advisory Board. The local planning group, professionals, service providers, families, survivors, community organizations and others will report an increase collaboration among organizations that serve TBI survivors and families.
	6.1.b. Assist the local planning groups to collect existing relevant data regarding local needs.		
	6.1.c. Assist the local planning groups to develop written 2-year local service delivery action plans to be updated annually.		
	6.1.d. Support the local planning groups in strengthening and developing local collaborative networks among agencies and organizations that serve TBI survivors and families.		
	6.1.e. Strengthen linkages among state agencies and with medical, rehabilitation and other service providers.		

Goal 6: Community-based long-term individualized services and supports will be available, affordable and accessible to individuals with traumatic brain injuries [TBI].				
Objective	Action	Criteria	Performance Measures	
6.2. Develop programs, services and supports identified in the 2-year action plan.	6.2.a. Disseminate the local 2-year action plan within each planning area.	TBI survivors and families have greater choice in services and supports.	Review of evidence of development of programs and services stated within the plan.	
	6.2.b. Support service providers and community programs in developing new and expanded programs in areas that are unserved or under-served.			
	6.2.c. Support advocacy groups and other community organizations to establish support groups and outreach programs in each local area as needed.			
6.3. Assess progress toward meeting the goals of the regional plans one year after the plans have been implemented.	6.3.a. In collaboration and consultation with local planning groups, review the progress toward meeting the goals stated in the 2-year action plans.	The plans produce measurable results.	Review of evidence of development of programs and services stated within the plan. The review should include identification of barriers to success and strategies for future years.	
	6.3.b. Update plans.			
6.4 Strengthen the infrastructure for service delivery to TBI survivors.	6.4.a. Collaborate with other state agencies that serve TBI survivors to improve coordination of services and training for staff.	State agencies will engage in ongoing collaborative efforts.	Inter-agency agreements and activities will increase.	

Goal 7: Professionals and providers working with individuals with traumatic brain injury [TBI] will be more knowledgeable in best practices of care and service delivery.			
Year to Begin: Year 4			
Partners: Department of Mental Health, professional organizations, hospital associations, Brain Injury Association of America, TBI Technical Assistance Center, TBI survivors/families, TBI service providers, law enforcement, and courts.			
Objective	Action	Criteria	Performance Measures
7.1. Develop guidelines and standards of care for training for professionals and providers on care specific to individuals with TBI.	7.1.a. Review existing guidelines, protocols and standards for care and service delivery provided in the acute, rehabilitation and follow/up community reintegration phases.	Professionals and providers are broadly defined to include everyone who comes into contact with TBI survivors and families.	Department of Mental Health and others find the draft guide and standard of care to be complete, readable and useful.
	7.1.b. Collect and review existing guidelines, protocols and standards of care developed in other states for care and service delivery provided in the acute, rehabilitation and follow/up community reintegration phases.	Professionals and providers should be able to recognize and assess TBI,	
	7.1.c. In consultation and collaboration with survivors, families, providers, professional organizations, state agencies, community organizations and others, review guidelines and standards of care for format, content and applicability to California.	understand long-term ramifications, treatment options, resources, appropriate medical and service referrals, and course of the disability.	
	7.1.d. Prepare a draft guideline and standards of care for TBI and distribute for comment and review.		

Goal 7: Professionals and providers working with individuals with traumatic brain injury [TBI] will be more knowledgeable in best practices of care and service delivery.			
Objective	Action	Criteria	Performance Measures
7.2. Finalize guide, standards of care, protocols and define methods of use and evaluation.	7.2.a. Convene an interdisciplinary group that includes survivors, families, community organizations, professionals, providers and others with specific knowledge and training to discuss and finalize the guidelines and standards of care including protocols and methods of use and evaluation.	The guidelines, standards of care, and protocols are statements of best practice and form the foundation for the provision of services through all phases of the traumatic brain injury.	The finalized guide, standards of care and protocols are judged to be satisfactory or better based upon feedback from the professional and provider communities as well as other partners.
	7.2.b. Develop training materials for the guide, standards of care and protocols.		The training materials are reviewed by selected professionals and providers and found to be useful.
	7.2.c. Develop a “train the trainer” curriculum and evaluation form for the training.		
7.3 Increase knowledge and practices of care specific to TBI.	7.3.a. Pilot guidelines, standards of care and protocols in selected hospitals and community settings and document change in practice.	The guidelines, standards of care, and protocols are statements of best practice and form the foundation for the provision of services through all phases of the traumatic brain injury.	The pilots meet or exceed the performance measures.
	7.3.b. Develop performance measures to evaluate the effectiveness of the pilots.		The pilots document positive changes in practice. The pilots choose to permanently adopt the guidelines, standards of care and protocol.
	7.3.c. Present guidelines, standards of care, protocols and evaluation results at conferences and workshops.		Invitations are sought to present the materials at three or more conferences at the end of the pilot period.
	7.3.d. Develop and implement strategies to support and encourage professional and provider groups to adopt and implement the guidelines, standards and protocols.		
	7.3.e. Develop performance measures to document the adoption and implementation of the guidelines, standards of care and protocols by professional and provider groups.		There is a 15 percent growth in the requests for the materials over the first two years of availability.
	7.3.e. Market the availability of training materials and the guidelines, standards of care and protocols.		

Goal 7: Professionals and providers working with individuals with traumatic brain injury [TBI] will be more knowledgeable in best practices of care and service delivery.			
Objective	Action	Criteria	Performance Measures
7.4. Increase the knowledge and practices of care specific to TBI among state governmental agencies.	7.4.a. Review policies and procedures related to TBI in California governmental agencies that interface with or fund services to TBI survivors.	Governmental agencies will be knowledgeable about TBI and will adopt and implement policies and procedures to provide or fund the provision of services and supports in a way that enhances the ability of the survivor to succeed in the community.	The standards and model language is developed within a year. “Train the trainer” training is provided to two agencies. The training is rated as useful by the majority of the participants, as documented on the evaluation form and comments from participants
	7.4.b. In consultation with the Brain Injury Association of America, identify states with exemplary policies and procedures for TBI services and funding.		
	7.4.c. In consultation with other California agencies, develop standards and model language for policies and procedures related to TBI.		
	7.4.d. Support and encourage California agencies to adopt/adapt the model policies and procedures.		
	7.4.e. Provide “train the trainer” training to select state governmental agencies on the guide, standards of care and protocols.		
	7.4.f. Develop performance measures to evaluate the effectiveness of the efforts to increase knowledge and amend policies and procedures among state agencies.		

Goal 8: Long-term stable funding will be available for the traumatic brain injury [TBI] system.			
Year to Begin: Year 2			
Partners: Department of Mental Health, legislators [state/local policy makers], Department of Finance, Department of Health Services – Medicaid, Brain Injury Association of America, TBI Advisory Board, TBI survivors/families, TBI service providers/professionals, and endowment funds.			
Objective	Action	Criteria	Performance Measures
8.1. Determine the components of and core services in an effective TBI system.	8.1.a. Using the plans developed for the Goals 1-7, identify the components of and core services in an effective TBI system. Add other components and services as required.	The TBI system will be sustained by long-term stable funding sources that are a mix of public and private funds.	
	8.1.b. Develop projected budgets for the components including identification of current funding sources.		
	8.1.c. Develop information on cost savings associated with an effective TBI system.		
8.2. Define the role of state and local government within the TBI system.	8.2.a. In consultation with other state agencies, survivors, families, providers, community organizations and others define the areas of direct responsibility of state and local government.	The State's share of responsibility is well defined and is financed by long-term stable funding.	
	8.2.b. Identify the gap between the current level of responsibility and the proposed level of responsibility.		
	8.2.c. Identify funding needs and sources for the gap. Identify opportunities to realize cost savings.		
	8.2.d. In consultation with the TBI partners, develop and implement a plan to increase existing and access new funding sources for TBI.		

Goal 8: Long-term stable funding will be available for the traumatic brain injury [TBI] system.			
Objective	Action	Criteria	Performance Measures
8.3. Develop a plan to access all sources	8.3.a. Identify other sources of funding for the TBI system including grants, foundation funds, charitable sources, etc.	The TBI system will aggressively seek funding from all sources.	
	8.3.b. Define the requirements and restrictions for the various sources including what organization or entity would be best equipped to apply for and use the funds.		
	8.3.c. Publicize the funding information and encourage providers, organizations and others to apply.		
	8.3.d. In consultation with the Department of Mental Health and the Advisory Board, determine the sources of funding the TBI Project should pursue.		
8.4. Improve access to current governmental funding sources.	8.4.a. Identify current sources of, eligibility requirements and barriers to accessing governmental funding for services for survivors.	TBI survivors will understand eligibility requirements and when eligible will receive funding.	
	8.4.b. Develop implement strategies to educate TBI survivors and families on eligibility requirements, and eliminate or reduce the barriers.		

Goal 8: Long-term stable funding will be available for the traumatic brain injury [TBI] system.			
Objective	Action	Criteria	Performance Measures
8.5. Expand public and private insurance and managed care organizations funding for TBI services	8.5.a. Identify the current criteria used by public and private insurance and managed care organizations to determine the scope and amount of services for TBI survivors.	Services and supports will not be limited by restrictive criteria that are imposed by public and private insurance and managed care organizations.	The plan will be found to be complete and satisfactory by Department of Mental Health, the Advisory Board, community organizations, professional and provider organization and others.
	8.5.b. Identify specific areas in which the criteria and coverage needs to be expanded.		
	8.5.c. In consultation with the Brain Injury Association of America identify and make contact with states that have successfully achieved changes in coverage.		
	8.6.d. Develop a plan and strategies to advocate for changes.		

Goal 9:	The community-based service delivery system for individuals with traumatic brain injury [TBI] will include affordable, appropriate living arrangements, employment and meaningful day activities, transportation, social and recreational opportunities and support groups.		
Year to Begin:	Year 4		
Partners:	Department of Mental Health, Department of Rehabilitation, TBI Advisory Board, local planning groups, TBI survivors/families, TBI service providers, Independent Living Centers, Adult Day Health Care Agencies, consumer-based organizations [e.g., consumer self-help], Department of Housing, County Mental Health/Social Services Departments, Brain Injury Association of America, Department of Transportation, private transportation companies, board and care homes, apartment/realtor associations, and Departments of Parks and Recreation.		
Objective	Action	Criteria	Performance Measures
9.1 Develop strategies to increase the availability of affordable, appropriate living arrangements.	9.1.a. In consultation with the Brain Injury Association of America and Centers for Independent Living, identify and contact states that have developed affordable living arrangements for TBI survivors to learn how it was done.	TBI survivors will have knowledge of and access to options for appropriate affordable living arrangements in the community.	The strategies to increase the availability of affordable, appropriate living arrangements are deemed feasible and realistic by Department of Mental Health, the Advisory Board and others.
	9.1.b. Contact other disability systems within the State that fund or include affordable living arrangements in the community to learn how it was done.		
	9.1.c. Analyze the data collected in 9.1.a. and 9.1.b. to determine feasibility of replicating the efforts and areas of statewide responsibility.		
	9.1.d. Support and assist local planning groups to identify needs for affordable living arrangements, existing resources and barriers to accessing the resources.		
	9.1.e. In consultation with local planning groups and others, develop strategies and actions to increase the availability of affordable appropriate living arrangements and to remove existing barriers.		
	9.1.f. Identify funding sources to develop living arrangements.		

Goal 9: The community-based service delivery system for individuals with traumatic brain injury [TBI] will include affordable, appropriate living arrangements, employment and meaningful day activities, transportation, social and recreational opportunities and support groups.			
Objective	Action	Criteria	Performance Measures
9.2. Develop strategies to increase employment opportunities and meaningful day activities.	9.2.a. In consultation with the Brain Injury Association of America identify and contact other states that have been successful in increasing employment opportunities and/or developing meaningful day activities to learn how it was done.	TBI survivors will have knowledge of and access to options for employment in the community and the necessary support to obtain and maintain the chosen option.	The strategies to increase employment opportunities are deemed feasible and realistic by Department of Mental Health, the Advisory Board and others.
	9.2.b. In consultation with supported employment providers, identify successful strategies for obtaining and maintaining employment for individuals with disabilities.	TBI survivors who do not qualify for or wish to seek employment in the community will have knowledge of and access to options for meaningful activities during the day. The survivors will be supported in obtaining and maintaining participation in the activities.	The strategies to increase the availability of meaningful day activities are deemed feasible and realistic by Department of Mental Health, the Advisory Board and others.
	9.2.c. In collaboration with Department of Rehabilitation identify barriers to successful employment and strategies to overcome the barriers.		
	9.2.d. Analyze the data collected in 9.2.a., b, and c. Develop a statement of barriers to successful employment and strategies to overcome the barriers.		
	9.2.e. In consultation with local planning groups and others determine the viability of the strategies on the local levels and prepare actions related to increasing employment opportunities.		
	9.2.f. Identify and contact successful day activity programs in the State to learn their strategies in program development and funding.		
	9.2.g. Identify and contact privately funded groups and organizations that provide meaningful day activities to learn their strategies in program development and funding.		

Goal 9: The community-based service delivery system for individuals with traumatic brain injury [TBI] will include affordable, appropriate living arrangements, employment and meaningful day activities, transportation, social and recreational opportunities and support groups.			
Objective	Action	Criteria	Performance Measures
9.2. Develop strategies to increase employment opportunities and meaningful day activities. [Continued]	9.2.h. Identify and contact supported living providers to learn how they find and access meaningful day activities.		
	9.2.i. Identify exemplary programs at adult schools and community colleges and encourage replication of the programs.		
	9.2.j. Analyze the data collected in 9.2.a., f, g, h and i and develop a statement of strategies to identify and access existing meaningful day activities; develop new programs; and replicate existing programs.		
	9.2.k. In consultation with local planning groups and others determine the viability of the strategies on the local levels and prepare actions related to developing options for meaningful day activities.		

Goal 9: The community-based service delivery system for individuals with traumatic brain injury [TBI] will include affordable, appropriate living arrangements, employment and meaningful day activities, transportation, social and recreational opportunities and support groups.			
Objective	Action	Criteria	Performance Measures
9.3. Develop strategies to improve the availability of transportation services.	9.3.a. Support and assist local planning groups to identify local transportation resources and needs and to develop strategies to increase the availability of local transportation and understanding of the specific needs of TBI survivors.	TBI survivors will have knowledge of and access to public transportation services that understand their special needs.	<p>The strategies to increase the availability of transportation and understanding of specific transportation needs of TBI survivors are deemed feasible and realistic by Department of Mental Health, the Advisory Board and others.</p> <p>TBI survivors and family members will make application for membership on state and local transportation boards and committees.</p>
	9.3.b. Support and assist local planning groups to initiate collaborative efforts with local public transportation providers.		
	9.3.c. Support and assist local planning groups to consult with the local Regional Center's transportation coordinator to identify successful strategies in accessing public transportation, including Paratransit.		
	9.3.d. Support and assist local planning groups to identify local transportation boards and committees, and determine membership eligibility, appointing authority and vacancies. Encourage the dissemination of the information and identification of TBI survivors or family members who are willing to make application.		
	9.3.e. Collaborate with the California Department of Transportation to identify state Boards and Committees and determine membership eligibility, appointing authority and vacancies. Disseminate the information and encourage TBI survivors and family members to apply for membership.		

Goal 9: The community-based service delivery system for individuals with traumatic brain injury [TBI] will include affordable, appropriate living arrangements, employment and meaningful day activities, transportation, social and recreational opportunities and support groups.			
Objective	Action	Criteria	Performance Measures
9.4 Develop strategies to increase the availability of social and recreational opportunities.	9.4.a. Support and assist local planning groups to identify and disseminate information on existing opportunities for social and recreational opportunities.	TBI survivors will have knowledge of and access to a variety of social and recreational opportunities.	The strategies developed by local planning groups are found to be feasible and realistic by the agencies represented in the network and by the Department of Mental Health and the Advisory Board.
	9.4.b. Support and assist local planning groups to identify social and recreational needs of TBI survivors.		
	9.4.c. Support and assist local planning groups to develop or enhance networks of publicly funded recreation services, other disability groups, and community organizations to develop strategies to increase the availability of social and recreational opportunities and to train staff in the special needs of TBI survivors.		
9.5. Develop strategies to expand the availability of support groups.	9.5.a. Support and assist local planning groups to identify and disseminate information on existing opportunities support groups. The information should include the purpose of the group, meeting times and contact person.	TBI survivors and caretakers will have knowledge of and access to support groups that meet their needs.	<p>A documented increase in the number of support groups in a majority of the local planning areas.</p> <p>A statewide network of support groups will exist within one year of the development of strategies.</p>
	9.5.b. Support and assist local planning groups to identify specific support group needs of TBI survivors and caretakers.		
	9.5.c. Support and assist local planning groups to identify and train people or organizations that are willing to start support groups to meet the identified need.		
	9.5.d. Support and assist local planning groups to acquire existing training materials for use in implementing 9.4.c.		
	9.5.e. In consultation with TBI partners develop strategies to develop a statewide network of support groups for TBI survivors and caretakers.		

Goal 10:		Long-term appropriate services for persons with traumatic brain injury [TBI] under 18 years of age will be available and accessible.	
Year to Begin:		Year 1	
Partners:		Department of Mental Health, local planning groups, Department of Developmental Services, Regional Centers, TBI survivors/family members, TBI service providers/professionals, pediatric hospitals, pediatric professionals, Brain Injury Association of America, TBI Technical Assistance Center, Department of Health Services Maternal and Child Health, Department of Education, and multi-cultural organizations.	
Objective	Action	Criteria	Performance Measures
10.1. Determine the needs of TBI survivors under the age of 18.	10.1.a. Support and assist the local planning groups in developing a survey for families with TBI survivors under the age of 18.	Children with TBI will have access to and knowledge of age appropriate long-term services and supports that begin at the time of the injury.	The needs of TBI survivors under the age of 18 will be identified throughout the State within one-year after the start of implementation of Objective 10.1.
	10.1.b. Support and assist the local planning groups to develop a strategy for outreach to schools, pediatric hospitals and other agencies that serve children to identify service needs of TBI survivors under the age of 18.		
	10.1.c. Support and assist the local planning groups to achieve cooperation by schools, pediatric hospitals and other agencies that serve children in distributing the survey developed in 10.1.a.		
	10.1.d. Support and assist the local planning groups to compile statistics on the needs of TBI survivors under the age of 18.		

Goal 10: Long-term appropriate services for persons with traumatic brain injury [TBI] under 18 years of age will be available and accessible.			
Objective	Action	Criteria	Performance Measures
10.2. Incorporate the identified needs into local plans.	10.2.a. Support and assist the local planning groups to place special emphasis on the needs of TBI survivors under 18 and their families in local plans.	The needs of TBI survivors under the age of 18 will be highlighted in local plans.	The strategies will be judged to be feasible and realistic by the Department of Mental Health, the Advisory Board and others.
	10.2.b. Support and assist the local planning groups to develop strategies to strengthen and/or implement services and supports for TBI survivors under 18 years.		
10.3. Strengthen the infrastructure for service delivery to TBI survivors under the age of 18.	10.3.a. Collaborate with other state agencies that serve TBI survivors under the age of 18 to improve coordination of services and training for staff.	State agencies serving TBI survivors under the age of 18 will be knowledgeable about and has staff trained to respond to the special needs of the group.	Staff from two agencies will be trained in the needs of TBI survivors under the age of 18 within two years of the implementation of Objective 10.3.

Goal 11: Long-term appropriate and culturally sensitive services for persons with traumatic brain injury [TBI] will be available and accessible.			
Year to Begin: Year 1			
Partners: Department of Mental Health, local planning groups, TBI survivors/family members, TBI service providers, multi-cultural organizations, and County Mental Health Cultural Competency Coordinators.			
Objective	Action	Criteria	Performance Measures
11.1. Determine the service and support needs of multi cultural TBI survivors.	11.1.a. Support and assist the local planning groups in developing a survey for multicultural TBI survivors.	TBI survivors and families have access to and knowledge of culturally sensitive and appropriate long-term services and supports that begin at the time of the injury.	The needs of multi-cultural TBI survivors will be identified throughout the state within one-year after the start of implementation of Objective 11.1.
	11.1.b. Support and assist the local planning groups to develop a strategy for outreach to multicultural groups to identify service needs of TBI survivors.		
	11.1.c. Support and assist the local planning groups to achieve cooperation of multicultural groups in facilitating contact with TBI survivors.		
	11.1.d. Support and assist the local planning groups to compile statistics on the needs of multicultural TBI survivors.		
	11.1.e. Advocate with the Center for Disease Control surveillance activities to collect statistics on race/ethnicity.		

Goal 11: Long-term appropriate and culturally sensitive services for persons with traumatic brain injury [TBI] will be available and accessible.			
Objective	Action	Criteria	Performance Measures
11.2 Incorporate the identified needs into local plans.	11.2.a. Support and assist the local planning groups to place special emphasis on the needs of multicultural TBI survivors and their families in local plans.	The needs of TBI survivors from all cultures will be highlighted in local plans.	The strategies will be judged to be feasible and realistic by the Department of Mental Health, the Advisory Board and others.
	11.2.b. Support and assist the local planning groups to develop strategies to strengthen and/or implement services and supports for multicultural TBI survivors.		
11.3 Strengthen the infrastructure for service delivery to multi cultural TBI survivors.	11.3.a. Collaborate with other state agencies that serve multicultural TBI survivors to improve coordination of services and training for staff.	State agencies serving TBI survivors knowledgeable about and with staff trained to respond to the special needs of the diverse and multi cultured group.	Staff from two agencies will be trained in the needs of TBI survivors from diverse cultures within two years of the implementation of Objective 11.3.
11.4 Ensure cultural sensitivity in all planning and service delivery efforts.	11.4.a. Review plans for cultural sensitivity.	Plans and actual service delivery will reflect the varying needs of a diverse multi cultured population of TBI survivors.	A bi-annual review of plans and service delivery practices will show measurable progress in ensuring cultural sensitivity.
	11.4.b. Include cultural sensitivity as a performance measure for services and plans.		
	11.4.c. Review all information and training to ensure cultural sensitivity.		

Goal 12:		Long-term appropriate services for persons with traumatic brain injury [TBI] aged 60 years and older will be available and accessible.	
Year to Begin:		Year 1	
Partners:		Department of Mental Health, local planning groups, Caregiver Resource Centers, TBI survivors/family members, Department of Aging, Long-Term Care Coalition, Department of Managed Care, and Department of Health Services Medicare/Medi-Cal.	
Objective	Action	Criteria	Performance Measures
12.1 Determine the needs of TBI survivors who are age 60 years and older	12.1.a. Support and assist the local planning groups in developing a survey for families with TBI survivors who are age 60 years and older.	People who are 60 years and older with TBI will have access to and knowledge of age appropriate long-term services and supports that begin at the time of the injury.	The needs of TBI survivors who are age 60 years and older will be identified throughout the state within one-year after the start of implementation of Objective 12.1.
	12.1.b. Support and assist the local planning groups to develop a strategy for outreach to senior centers, Department of Aging, and other agencies that serve senior citizens to identify service needs of TBI survivors who are age 60 years and older.		
	12.1.c. Support and assist the local planning groups to achieve cooperation by organizations and agencies that serve senior citizens in distributing the survey developed in 12.1.a.		
	12.1.d. Support and assist the local planning groups to compile statistics on the needs of TBI survivors who are age 60 years and older.		

Goal 12: Long-term appropriate services for persons with traumatic brain injury [TBI] aged 60 years and older will be available and accessible.			
Objective	Action	Criteria	Performance Measures
12.2 Incorporate the identified needs into local plans.	12.2.a. Support and assist the local planning groups to place special emphasis on the needs of TBI survivors who are age 60 years and older.	The needs of TBI survivors who are age 60 years and older will be highlighted in local plans.	The strategies will be judged to be feasible and realistic by the Department of Mental Health, the Advisory Board and others.
	12.2.b. Support and assist the local planning groups to develop strategies to strengthen and/or implement services and supports for TBI survivors under 18 years.		
12.3 Strengthen the infrastructure for service delivery to TBI survivors who are age 60 years and older.	12.3.a. Collaborate with other state agencies that serve TBI survivors who are age 60 years and older to improve coordination of services and training for staff.	State agencies serving TBI survivors who are age 60 years and older will be knowledgeable about and have staff trained to respond to the special needs of the group.	Staff from two agencies will be trained in the needs of TBI survivors who are age 60 years and older within two years of the implementation of Objective 12.3.